Iowa Department of Human Services

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Governor	Lt. Governor	Director

INFORMATIONAL LETTER NO.1062

DATE: October 13, 2011

TO: All Iowa Medicaid Providers Billing Electronically

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Important 5010 HIPAA Transition Information

EFFECTIVE: January 1, 2012

The Version 5010 transition is less than three months away for all HIPAA covered entities. This means that to submit transactions electronically, all covered entities must upgrade from Version 4010/4010A to Version 5010. Version 5010, unlike version 4010, accommodates the new ICD-10 code sets and is a required preliminary step for the use of the new ICD-10 medical code sets.

To ensure there is no disruption of claim submissions on January 1, 2012, the Iowa Medicaid Electronic Data Interchange Support Services (EDISS) encourages all trading partners to enroll in Total OnBoarding (TOB) well before the January 2012 deadline. If the TOB profile has not been enrolled for 5010 as of this date, the provider will no longer be active for electronic transactions because the current (4010) setup will be deleted from the EDISS system. Effective October 1, 2011, new enrollees will only be allowed to register for the 5010 format for any new transactions (no more new 4010), which is consistent with Medicare.

A common question that EDISS receives is, "What exactly should I be doing for the 5010 transition?" To assist with the 5010 transition, follow the guidelines on the checklist on the EDISS website at http://www.edissweb.com/docs/shared/5010_checklist.pdf. The checklist is separated into three sections: Direct Providers (not using PC-ACE Pro32), Direct Providers (using PC-ACE Pro32), and Providers sending files through a Clearinghouse or Billing Service. Select the most appropriate section and follow the guidelines on the checklist to begin preparing for the transition.

As part of this transition, any additional electronic transaction user's access in 4010 (i.e., 835, 270/271, 276/277) will need to be re-registered for the 5010 format through TOB. Re-registering will ensure electronic functionality is not removed at the time of 5010 cut over.

A substantial change that is occurring with HIPAA 5010 Implementation is the replacement of the Noridian Claim Confirmation Report (CCR). The CCR is also known as the Gen Report. Across all lines of business for 5010, the CCR will be replaced by the 277CA.

277CAs will be returned to the Trading Partner 5010 mailboxes, the same way that CCRs were in 4010. However, 277CAs will be delivered in ANSI X12 format. Trading Partners will

need to either view the 277CAs in text format, or they can use their billing software to translate the 277CA into a readable document similar to the CCR.

EDISS recommends that all trading partners check with their in-house billing software, external software vendor, billing service, or clearinghouse to ensure the 277CA will be able to be translated. If your vendor cannot translate the 277CA, PC-ACE Pro32 has that functionality and could be used by your facility.

Please visit www.cms.gov/ICD10 for the latest news and resources to help you prepare for the transition to both 5010 as well as ICD-10.

If you have any questions, please contact the IME Provider Services Unit, 1-800-338-7909, locally 515-256-4609 or by email at imeproviderservices@dhs.state.ia.us.